Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION RECEIVED OIL & GAS CONSERVATION DIVISION

WELL PLUGGING RECORD

Form CP-4 December 2003 Type or Print on this Form

Form must be Signed

All blanks must be Filled K.A.R. 82-3-117 KCC WICH Lease Operator: Quality Well Service API Number: 15 - 033-20445 - 00 - 00 Lease Name: Scheufler Address: 401 W Main, Lyons, KS 67554 21-5 Phone: (620)727-3410 _____ Operator License #: 31925 Spot Location (QQQQ): _____ - C Type of Well: Gas 660 3 300 Feet from North / South Section Line (Oil, Gas D&A, SWD, ENHR, Water Supply Well, Cathodic, Other) (If SWD or ENHR) 4320 4620 East / West Section Line The plugging proposal was approved on:_ (Date) Sec. 21 Twp. 33 S. R. 20 East West _____ (KCC District Agent's Name) County: Commanche Is ACO-1 filed?
✓ Yes
No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) Date Well Completed: Plugging Commenced: 11-2-05 __ Depth to Top: _____ Bottom: ____ _____ T.D. __ Depth to Top: ___ __ Bottom: ____ Plugging Completed: 11-4-05 Depth to Top: ___ __ Bottom: ___ Show depth and thickness of all water, oil and gas formations. Oil, Gas or Water Records Casing Record (Surface Conductor & Production) Formation Content From То Pulled Out Size Put In 8 5/8 670 4 1/2 5408 3935'

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set. Pumped 150 pounds of hulls, 25 sacks cement, tagged it at 5200', pumped another 250 pounds of hulls, 25 sacks cement. Ripped casing at 4090', and 3935', came free, pulled up to 1000', pumped 10 gel, 50 sacks cement, pulled to 680', pumped 50 sacks cement, pulled to 250', pumped 30 sacks cement, pulled to 40', pumped 10 sacks. Name of Plugging Contractor: Quality Well Service Address: 401 W Main, Lyons, KS 67554 Name of Party Responsible for Plugging Fees: Quality Well Service County, Rice Kansas __ (Employee of Operator) or (Operator) on above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed. and the same are true and correct, so help me God. SUSIE KNIGHT Notary Public - State of Kansas My Appt. Expires 12-10-05

My Commission Expires: ____

SUBSCRIBED and SWORN TO before me this 3 day of

Knight Notary Public J